

COMMONWEALTH of VIRGINIA

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES 600 East Broad Street, Suite 1300 Richmond, VA 23219

September 12, 2008

ADDENDUM No. 1 TO VENDORS:

Reference Request for Proposal: RFP 2008-02
Dated: August 13, 2008
Due: November 14, 2008

Below are updates that may delete, add, modify or clarify certain aspects of the aforementioned RFP. Please incorporate as necessary.

Page 3-5 $\S 3.4.1$ Platforms, Table 3.4.1, 6^{th} Row of Table, 2^{nd} Column:

CHANGE Storage from "146 GB" to "2.4 TB" (see below).

9	IBM Unix System P5 510Q (1) CPU 1.6 GHz RAM 4 GB Storage 146 GB 2.4 TB	IBM AIX Version 5.3.0.0	IBM OnDemand Version 7.1.2.4	Development Test Production	441	Server for VAMMIS Document Archival and Retrieval System (FirstDARS TM). An electronic library of all MMIS output reports and claim images.
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Page 3-6 §3.4.1 Platforms, Table 3.4.1, 10th Row of Table, 2nd Column:

CHANGE Storage from "203 GB" to "656 GB" (see below).

13	Intel based (12) MediCall Server- CPU 1.4 GHz RAM 4 GB Storage 100 GB Hummingbird Storage 203-GB 656	Microsoft Windows 200X Server	Hummingbird DM 5.1.0.5	Development Test Production	578	Generic file and intranet servers as well as providing the following specific needs: Web-based online Help for VAMMIS Server for GUI files for ClientBuilder Web-based online system documentation. Secure & unsecured FTP servers
						FTP servers File servers

Page 4-64 §4.2.3 Key Staff Requirements, Table 4.2.3.5, Report to:

CHANGE "Business Operations Manager" to "Executive Account Manager" (see below).

Page F.I -5, Section 7 – Appendix, #19:

ADD additional Bullet between current bullets #2 and #3. To read "Retain all digital recordings of incoming and outgoing calls for a period of no less than 12 months" (see below):

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- 1) See Attachment 1 for copy of mandatory pre-proposal conference attendance roster.
- 2) See Attachment 2 for the Department of Medical Assistance Services response to questions/inquiries as submitted by potential Offerors.

Please Note: Some questions may take additional time in order to generate an adequate response. If you do not see a response to a question you have submitted, please monitor the DMAS and eVA website for future addendums.

Note: A signed acknowledgment of this addendum must be received by this office either prior to the due date and hour required or attached to your proposal response. Signature on this addendum does not substitute for your signature on the original proposal document. The original proposal document must be signed.

Sincerely,

Christopher M. Banaszak

DMAS Contract Manager

Name of Firm:	
Signature and Title: _	
Date:	

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Question	RFP Cite	Vendor Question	DMAS Response
1	Global	Is DMAS open to interim solutions, i.e. COTS solutions that could be applied in 90-120 days, which is well in advance of the implementation of a new MMIS? Is a partial response to the RFP acceptable, i.e. stating our capabilities with specific functionality?	No, DMAS is not interested in interim solutions. Partial responses to the RFP will not be accepted. Proposals will not be accepted unless they conform to all of the RFP requirements, and contracts will be awarded only in accordance with the requirements and terms of the RFP.
		Examples: - solution for the processing and pricing of all medical pharmacy claims (physician office, infusion suite, medical home). This would provide the Commonwealth with a solution that applies strict, automated pricing techniques and specific clinical guideline edits to generate savings as much as \$.59 per member per month web-based prior authorization solution	
2		Reference: http://www.dmas.virginia.gov/ab-rfp2008_docshome.htm Question: When does DMAS plan to post the evaluation criteria to the procurement website? What will this criteria include?	DMAS anticipates posting the evaluation criteria before the end of September 2008. The criteria are based on section 2.1.14.
3	2.3 (p. 2-15)	It is our assumption that the selection and use of small businesses for this procurement is completely within our discretion and can be made by our own internal selection process and criteria. Is this correct? If not, please explain and include specific selection criteria such as dollar thresholds for competition and Virginia Purchasing Policies that must be followed.	Correct: selection and use of small businesses for this procurement is completely within the Offeror's discretion and can be made by its own internal selection process and criteria; However, in order to receive credit, selected small businesses, as documented on the Offeror's Small Business Subcontracting Plan, must be certified by the Virginia Department of Minority Business Enterprises (DMBE) before the date and time that proposals are due.

4	2.3 (p. 2-15)	Do all small businesses have to be based (in addition to being registered) in Virginia to be counted in the Evaluation Criteria for the points assigned to this RFP requirement?	No, small business subcontractors utilized in the performance of this contract do not have to be based in Virginia. However, to be counted in the evaluation process they must be registered and certified as a small business by the Virginia DMBE before the date and time proposals are due.
5	2.3 (p. 2-15)	Reference: A Small Business Plan can account for up to 20 percent of the RFP total points assigned. Question: Can DMAS explain further the methodology of scoring this section of the proposal and clarify the threshold level desired?	The scoring methodology and clarification for this criteria will be forthcoming with the posting of the sample evaluation forms. DMAS does not have any desired thresholds levels; However, please refer to the following RFP sections • 2.1.14, Evaluation Factors, item v; and • 2.3, Offeror Profile, Supplier Small Business, which indicates that an Offeror's Small Business Subcontracting Plan can account for up to 20 percent of the RFP total points.
6	Table 3.4.1 Diagram Ref #4 (p. 3-4)	We understand the current arrangement DMAS has with the vendor for the non-supported version of the existing Z/OS operating system. Is it safe to assume that the upgrade to the Z/OS operating system will be completed by contract award? If not, will the extension from IBM for the support of this operating system be passed on to the winning bidder? What is the annual support cost associated with running version 1.4 from IBM?	The upgrade to Z/OS 1.9 is in process and will be completed by 12/31/2008.

7	4.1.1.1.3 (p. 4-3)	Will DMAS please confirm there are only three variations of the assessment packages received by the FAS contractor? Those assessment packages are UAI, DMAS 96, and DMAS 97. If more than three variations exist, will DMAS please define those variations?	There are not three variations as stated in the question. A screening package contains the following completed forms: UAI, DMAS-96, DMAS-95 Level I/II, and the DMAS-97.
			The types of packages are Short Assessments, Full Assessments, and HIV/AIDs Assessments. These assessments include the forms listed above.
			Please visit the reference libraries for copies of the forms, located under Fiscal Agent Services / Operations Documents / Forms / Assessments.
8	4.1.1.4 (p. 4-8)	Reference: The Contractor fulfills all prospective and retrospective DUR reporting requirements as directed by DMAS and implements new initiatives as the clinical/market information becomes available.	As stated in Section 4.2.5, when completing the Cost Proposal (see Section 4.4), Offerors will be required to provide hourly rates for all proposed staff, with the exception of the Key Staff required in Section 4.2.1 of this RFP. Significant changes in the scope of work may
		Question: The Contractor agrees to fulfill all contractual reporting requirements defined at the time of contract signature. Should significant additional scope of work be required, is DMAS prepared to contractually adjust staffing or reimbursement to accommodate the new requirements?	result in a change to the number of required staff during the contract term.

9	4.1.1.5	The last paragraph states, "DMAS will adopt additional	The intent of this statement is to ensure that the
	(p. 4-10)	standard transactions in the future, such as electronic	Contractor is aware that additional transactions and/or
		claims attachments, as well as enforce future HIPAA	versions of transactions may be mandated and thus
		mandates. The Contractor must accommodate the	incorporated as part of the Virginia MMIS in
		timely use of emerging EDI standards as they become	accordance with any required schedule(s). Such
		available. Furthermore, the selected Contractor must	changes will be addressed through the Change
		remain current with regard to these emerging standards	Management methodology.
		throughout the life of this contract." It is our	
		assumption that the intent of this statement is to insure	
		that the contractor is aware that these future transactions	
		are coming and that the expectation of DMAS is that	
		they will be implemented into the system. It is not a	
		statement made with an expectation that the bidder	
		scope and cost these future changes and include them in	
		this RFP response. Is this a correct assumption? If not,	
		please elaborate on how this statement should be	
		interpreted and clearly describe the expectations of the	
		bidder.	
10	4.1.2.19.2	Oracle Government Financials commercial package is	The DMAS Technology (Section 3.1) is hosted by
	(p. 4-36)	utilized by DMAS as a component of the DMAS	VITA and the Commonwealth provides the Oracle
		Technology Applications. The modules used are	licenses.
	3.5.1	General Ledger, Accounts Payable, Accounts	
	(p. 3-10)	Receivable and Purchasing. According to the DMAS	
		Technology Platform Table 3.5.1, Diagram Ref# 40,	
		there are 59 Oracle Government Financials System	
		users. How many licenses are needed to support DMAS	
		users of the Oracle Government Financials System?	

11	4.1.4 (p. 4-39)	Reference:the multiple document management technologies currently in use will be consolidated into a	The requirement is to integrate the existing help content into a single unified ECM solution.
		single unified Enterprise Content Management (ECM solution	
		Question: The DocuTraxx system appears to drive the on-line help feature of the current system. If this product is proprietary to the incumbent, will a new	
		vendor be required to bid a replacement tool and develop the help content for the entire MMIS system?	
12	4.1.4 (p. 4-39)	Reference: The FA Contractor must construct the solution and address conversion of all current interfaces and migration of existing production documents and images to the new ECM and develop a document management methodology.	Refer to tables in the Risk Management sections (4.1.5.2 and 5.1.5.2) for data retention requirements. These requirements are applicable to documentation and image files. Section 3 contains the storage volumes of the platforms that currently host this information.
		Question: What amount of history is to be maintained? What volumes exist today?	
13	4.2.2 (p. 4-60)	Reference: Reports to: Business Operations Manager Question: The Business Quality Assurance Manager reports directly to the Executive Account Manager in the Organization Chart located on page 4-60. However, in the Requirements Narrative in table 4.2.3.5, this position reports to the Business Operations Manager. Please clarify the position to which the Business Quality Assurance Manager reports.	We agree that 4.2.2 and 4.2.3.5 are in conflict. The Requirements Narrative in Table 4.2.3.5 should be changed to be consistent with 4.2.2 Key Staff Organizational Chart whereas the Business Quality Assurance Manager reports directly to the Executive Account Manager.
14	4.4.6.3 (p. 4-86)	In Group I of table C-1, is it DMAS' intention that only CBUs are to be listed there and that there is no "fixed" component that should be posted in the Base Fixed Price Line?	Correct. The "BASE FIXED PRICE" row is intended as a Group I header for the CBU section in the table.

15	Appendix A.I (p. A.I-1 & 2)	After contract award, what reporting methods and reporting schedules does DMAS expect for documenting small business activity and financial contract contribution throughout the life of the contract? Please elaborate.	Please refer to clause 12, Reporting, in Appendix E.V, F.IV, and G.IV for small business reporting requirements.
16	Appendix A.I,	Reference: Column 5 - Planned Involvement During Initial Period of the Contract Question: What is the Period of Performance that DMAS is referring to with "During Initial Period of the Contract"?	The "Initial Period of the Contract" is referenced in each of the three (3) separate contracts as the "Operations Phase". The Fiscal Agent Services Contract is 4 years, the Provider Enrollment Services Contract is 2 years, and the Drug Rebate Services Contract is 3 years. Should DMAS, at its discretion, elect to extend a contract, DMAS would expect the Contractor to meet or exceed the initial planned utilization of small businesses in the performance of the contract.
17	Appendix E.I #11 (p. E.I-4)	Requirement states that offeror agrees to establish and maintain DMAS-approved Health Care Assessment processing procedures to include "accept online/electronic assessments and process according to established business rules." Does the term "establish" imply that this functionality and process definition does not exist today and must be implemented during the takeover / transition phase?	The term "establish" is related to the Offeror's operational procedures that need to be put in place. The functionality currently exists and the process is being done today.

18	Appendix E.1 #26 (p. 8)	Reference: Req #26 - Does the Offeror agree to provide a 24 x 7 Pharmacy Help Desk to assist with the following types of calls: POS Transmission errors; Claim reversal when not received; and after normal	The PDL contract is procured separately and is not part of this RFP. As stated in Requirement #26, The Fiscal Agent Pharmacy Help Desk is responsible for POS transmission errors; Claim reversal when not received;
		business hours (POS claim questions (e.g. coverage, limits, status, denial reasons)?	and after normal business hours (POS claim questions) e.g. coverage, limits, stats, denial reasons).
		Question: What is the intent for the PDL contractor call center? Will they answer calls related to non-clinical issues such as NPI, Tamper-Resistant Pads, eligibility,	
		etc? Please further explain the roles of these 2 call centers - POS vendor and PDL vendor.	
19	Appendix E.1 #38 (p. 9)	Reference: Req #38 - Does the Offeror agree to advise DMAS of drug products coming off patent where a potential cost savings may be achieved?	No.
		Question: Since the PDL vendor will need to constantly monitor the patent status of drugs to determine when to set the generic drugs to preferred status on the preferred drug list, we recommend this requirement remain with the PDL vendor and be removed from the POS vendor. Does DMAS agree?	
20	Appendix E.1 #41 (p. 9)	Reference: Req #41 - Does the Offeror agree to facilitate and support the expansion of the DUR Board review activities such as Behavioral Health?	The nature of DUR is volatile as drug usage changes. DMAS and the DUR Board may at any time request additional information in support of expanding the DUR program, which may or may not be included in the
		Question: Please explain further. Is this to be in addition to the existing RetroDUR and Provider Profiling program or included as part of the monthly/quarterly review cycles?	monthly/quarterly review cycles.

21	Appendix E.I #80 (p. E.I – 19)	The last bullet point of question number 80 states "Load and assist DMAS with QA for the annual budget load process." This process involves downloading the annual budget interface file (FN-F-004) and producing the Budget Upload Control Report (FN-O-083). Please describe the QA expectations for this task. For example, is it sufficient to validate that the download completed correctly and that the report was produced and distributed appropriately or are there other expectations	It is DMAS' expectation the Offeror will describe its QA approach to this requirement.
22	Appendix E.1 #142 (p. E.I-32)	of the bidder? If there are, please describe in detail. Will DMAS please clarify the following: "Does the Offeror agree to provide a single point of entry for all provider services offered by DMAS even if the Offeror is not the entity providing those services"? Is the reference to "provider services offered by DMAS" specific to any entity currently enrolled and eligible in the MMIS Provider Master tables as a provider of health care services eligible to submit a claim to the MMIS? Will DMAS please clarify the intent of this requirement?	The Medicaid Web Portal is intended to be the single point of entry and authentication for all provider web services that require a sign on. For example, if FAS and PES are awarded to separate contractors, a provider would be authenticated at the Medicaid Web Portal hosted by the FAS Contractor and the link to the PES Contractor's web application would be activated without additional authentication required. Providers are only required to log in once. No, "provider services offered by DMAS" is not a reference to providers enrolled; it is a reference to services made available to the provider community.
23	Appendix F.1 #19 (p. 5)	Reference: Req #19: Provide the capability to review and furnish DMAS historic call recordings Question: The incumbent currently provides previous week's recordings to DMAS. Is DMAS now asking Offerors to maintain an archive of call recordings? How long must the recordings be archived?	Yes, DMAS is now asking Offerors to maintain an archive of call recordings. The incumbent does not currently provide the previous week's digital audio recordings to DMAS. DMAS is requiring the Contractor to digitally maintain the audio recordings of all incoming and outgoing Provider Enrollment Telephone Call Center calls for a period of no less than 12 months.